

## FAX TRANSMISSION



DATE: May 17, 2005  
CLIENT NO.: R2184.0105  
MESSAGE TO: Examiner Nathan Hillery  
COMPANY: U.S. Patent and Trademark Office  
FAX NUMBER: 703-872-9306  
PHONE:  
FROM: Mark J. Thronson  
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PAGES (Including Cover Sheet): 18 HARD COPY TO FOLLOW: ☐ YES ☒ NO

Please file the attached Credit Card Payment Form, Petition for Extension of Time, and Amendment in Application No. 09/901,018. Applicant's undersigned representative certifies that the attached Credit Card Payment Form, Petition for Extension of Time, and Amendment are being filed with the U.S. Patent and Trademark Office on May 17, 2005 by facsimile transmission.

Mark J. Thronson, #33,082

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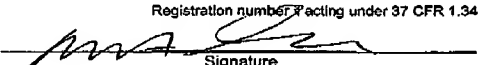
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PTO/SB/22 (12-04)

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		<b>Docket Number (Optional)</b> R2184.0105/P105	
<b>Application Number</b> 09/501,018		<b>Filed</b> July 10, 2001	
<b>For</b> DOCUMENT MANAGEMENT APPARATUS, RELATED DOCUMENT EXTRACTING METHOD, AND DOCUMENT PROCESSING ASSIST METHOD			
<b>Art Unit</b> 2176		<b>Examiner</b> Nathan Hillery	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	<b>Fee</b> \$120	<b>Small Entity Fee</b> \$60
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020	\$510
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1590	\$795
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1073.			
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number 33,082 <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number acting under 37 CFR 1.34			
 Signature		May 17, 2005 Date	
Mark J. Thronson Typed or printed name		(202) 775-4742 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of 1 forms are submitted.			

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